



Department of Health and Environment

Azzie Young, Ph.D., Secretary

November 26, 1991

Northeast District Office
808 W. 24th Street
Lawrence, Kansas 66046-4417

Reply to: (913) 842-4600
FAX: 842-3537

William E. Dame, Plant Manager
Drew Industrial (Ashland Chemical)
3155 Fiberglass Road
Kansas City, Kansas 66115

Re: Hazardous Waste Compliance Inspection
EPA Identification Number KSD000203638

Dear Mr. Dame:

On October 29, 1991, your facility was inspected to determine compliance with state hazardous waste regulations.

The inspection revealed that Drew Industrial generates less than 25 kilograms of hazardous waste chloroform (U044) and waste freon (F001) per month.

In addition to being a small quantity generator, Drew Industrial has a hazardous waste storage permit. The facility is therefore, subject to the requirements of 40 CFR Parts 260 TO 264, 268, 270, 124 and the specific conditions of Permit Number KSD000203638.

The inspection identified the following items not in compliance with state and federal regulations concerning generators of hazardous waste:

1. Two (2) drums of waste pentachlorophinate located in your hazardous waste storage area are marked with the incorrect waste identification code U242 in violation of K.A.R. 28-31-3.

The correct identification code for this waste is F027.

2. Dwight Hammon has not received documented annual updated hazardous waste management training as required by attachment III, Section four (4) of the Permit and 40 CFR 264.16.
3. There is no manifest document number on the hazardous waste shipment dated September 12, 1991, in violation of K.A.R. 28-31-4(d)(1).
4. On your land disposal restriction (LDR) notice dated September 19, 1991, you identified the manifest document number as AR-518382. The manifest document number is incorrect and therefore in violation of K.A.R. 28-31-14.



R00011213
RCRA Records Center

William E. Dame, Planner
Drew Industrial (Ashland Chemical)
November 26, 1991
Page 2

A correct manifest document number is a unique five (5) digit number.

The above violations must be corrected by December 30, 1991. Notify our department in writing when corrected and identify the corrective action taken for each violations noted. In addition, please identify the disposal method you plan to use for your F027 waste.

Based on the information submitted in your letter dated November 19, 1991, the seven (7) drums of waste resinew currently inside your hazardous waste storage area can be reclassified as non hazardous waste. Please notify the department in writing identifying the disposal method or facility you plan to use for this waste.

During the inspection I noted seventy two (72) drums of unknown materials located next to your hazardous waste storage area. In your letter dated November 6, 1991, you identified the contents in these drums as follows:

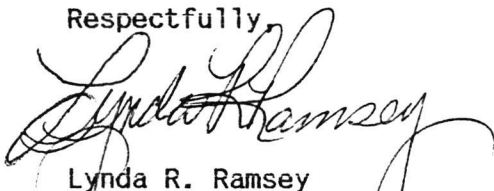
1. Analysis is pending for containers numbered 21, 29, 33, 34, 35, 41, 42, 43 and eight (8) drums of Power Blender Clean-Out Powder. Please submit copies of these analyses to our department by December 31, 1991.
2. Five (5) drums of hazardous waste are identified as follows:
 - (A) Two (2) drums chrome contaminated sand (D007)
 - (B) Two (2) drums waste cronox (D001)
 - (C) One (1) drums waste Olin 2002 (D001-D002)

These hazardous waste containers must be managed in accordance with the state and federal regulations.

The remaining fifty one (51) containers are either empty, contain re-workable or raw materials, or are non hazardous materials.

Your cooperation with the hazardous waste management program is appreciated. If you have questions concerning this letter, please call me at the KDHE Northeast District Office.

Respectfully,



Lynda R. Ramsey
Environmental Technician
Inspections and Enforcement Section
Bureau of Air and Waste Management

LRR:gz

C: Steve Broslavick, Bureau of Air and Waste Management
Tom Gross, Bureau of Air and Waste Management
NEDO



Hazardous Waste Compliance Monitoring and Enforcement Log

RECEIVED
BUREAU OF
JAN 8 1992
AIR and WASTE
MANAGEMENT

FORM
A

HANDLER

ID NUMBER: KSD0000203638

LDF () TSF ☒ GEN () KG () SQ ☒ TRA ()
HWM () HWB () UOM () UOB () NOT A GEN ()

HANDLER NAME:

Drew Industries (Aspland Chem)

AT

CL

RCRIS

1-15-92

STREET:

3155 Filberglass

CITY:

Kansas City

EVALUATION

New ☐

Followup ☒

Delete ☐

9/24/93

Date

YY 91 MM 10 DD 29

Agency S

Type CAF

Reason 01

Person LRR

District ME

Areas of Evaluation (EV - Evaluted, NE - Not Evaluated, NA - Not Applicable)

Generator		Transporter		Treatment/Storage/Disposal Facility				Other	
GER <input checked="" type="checkbox"/>	GPT <input type="checkbox"/>	TGR <input type="checkbox"/>		DCH <input type="checkbox"/>	DGW <input type="checkbox"/>	DMC <input type="checkbox"/>	DPP <input type="checkbox"/>	CAS <input type="checkbox"/>	
GGR <input type="checkbox"/>	GRR <input type="checkbox"/>	TMR <input type="checkbox"/>		DCL <input checked="" type="checkbox"/>	DIN <input type="checkbox"/>	DMR <input checked="" type="checkbox"/>	DSI <input type="checkbox"/>	FEA <input type="checkbox"/>	
GLB <input type="checkbox"/>	GSC <input type="checkbox"/>	TOR <input type="checkbox"/>		DCP <input checked="" type="checkbox"/>	DLB <input checked="" type="checkbox"/>	DOR <input type="checkbox"/>	DTR <input type="checkbox"/>	ILD <input type="checkbox"/>	
GMR <input type="checkbox"/>	GSQ <input type="checkbox"/>	TRR <input type="checkbox"/>		DFR <input type="checkbox"/>	DLF <input type="checkbox"/>	DOT <input type="checkbox"/>	DTT <input type="checkbox"/>		
GOR <input type="checkbox"/>		TWD <input type="checkbox"/>		DGS <input checked="" type="checkbox"/>	DLT <input type="checkbox"/>	DPB <input type="checkbox"/>	DWP <input type="checkbox"/>		

COMMENTS

In Compliance

VIOLATION # 1 Link to:

New ☐ Change ☒ Delete ☐ Comments ☐

Agency	Number	Area	Class	Priority	Type
<u>S</u>	<u>5</u>	<u>GGR</u>	<u>2</u>	<u></u>	<u>SR</u>

Regulation Citation: KAR 28313

Date Determined: MM 10 DD 29 YY 91

Returned to Compliance: MM 12 DD 30 YY 91

Scheduled: MM 12 DD 30 YY 91

Actual: MM 12 DD 17 YY 91

VIOLATION # 2 Link to:

New ☐ Change ☒ Delete ☐ Comments ☐

Agency	Number	Area	Class	Priority	Type
<u>S</u>	<u>6</u>	<u>DGS</u>	<u>1</u>	<u></u>	<u>SR</u>

Regulation Citation: Personnel Training

Date Determined: MM 10 DD 29 YY 91

Returned to Compliance: MM 12 DD 30 YY 91

Scheduled: MM 12 DD 30 YY 91

Actual: MM 12 DD 17 YY 91

VIOLATION # 3 Link to:

New ☐ Change ☒ Delete ☐ Comments ☐

Agency	Number	Area	Class	Priority	Type
<u>S</u>	<u>7</u>	<u>DMR</u>	<u>2</u>	<u></u>	<u>SR</u>

Regulation Citation:

Date Determined: MM 10 DD 29 YY 91

Returned to Compliance: MM 12 DD 30 YY 91

Scheduled: MM 12 DD 30 YY 91

Actual: MM 12 DD 17 YY 91

VIOLATION # 4 Link to:

New ☐ Change ☒ Delete ☐ Comments ☐

Agency	Number	Area	Class	Priority	Type
<u>S</u>	<u>8</u>	<u>DLB</u>	<u>2</u>	<u></u>	<u>SR</u>

Regulation Citation: KAR 28314

Date Determined: MM 10 DD 29 YY 91

Returned to Compliance: MM 12 DD 30 YY 91

Scheduled: MM 12 DD 30 YY 91

Actual: MM 12 DD 17 YY 91

Discarded

RECEIVED
BUREAU OF
ENVIRONMENTAL
HEALTH
AND
SAFETY
Hazardous Waste
Division

Hazardous Waste Compliance Monitoring and Enforcement Log

FORM
B

ID Number:

Handler Name:

VIOLATION

New ☐ Change ☐ Delete ☐

Link to:

Comments ☐

Agency Number Area Class Priority Type

Regulation Citation:

Date Determined

Returned to Compliance

MM DD YY

Scheduled: MM DD YY

Actual: MM DD YY

VIOLATION

New ☐ Change ☐ Delete ☐

Link to:

Comments ☐

Agency Number Area Class Priority Type

Regulation Citation:

Date Determined

Returned to Compliance

MM DD YY

Scheduled: MM DD YY

Actual: MM DD YY

VIOLATION

New ☐ Change ☐ Delete ☐

Link to:

Comments ☐

Agency Number Area Class Priority Type

Regulation Citation:

Date Determined

Returned to Compliance

MM DD YY

Scheduled: MM DD YY

Actual: MM DD YY

VIOLATION

New ☐ Change ☐ Delete ☐

Link to:

Comments ☐

Agency Number Area Class Priority Type

Regulation Citation:

Date Determined

Returned to Compliance

MM DD YY

Scheduled: MM DD YY

Actual: MM DD YY

VIOLATION

New ☐ Change ☐ Delete ☐

Link to:

Comments ☐

Agency Number Area Class Priority Type

Regulation Citation:

Date Determined

Returned to Compliance

MM DD YY

Scheduled: MM DD YY

Actual: MM DD YY

VIOLATION

New ☐ Change ☐ Delete ☐

Link to:

Comments ☐

Agency Number Area Class Priority Type

Regulation Citation:

Date Determined

Returned to Compliance

MM DD YY

Scheduled: MM DD YY

Actual: MM DD YY

ENFORCEMENT

New ☐ Change ☐ Delete ☐

Date YY MM DD

Number

Agency Type

District

Person

COVERED VIOLATIONS

Link to:

Agency	Violation Number	Area
S	<input type="text"/>	<input type="text"/>
S	<input type="text"/>	<input type="text"/>
S	<input type="text"/>	<input type="text"/>
S	<input type="text"/>	<input type="text"/>

Agency	Violation Number	Area
S	<input type="text"/>	<input type="text"/>
S	<input type="text"/>	<input type="text"/>
S	<input type="text"/>	<input type="text"/>
S	<input type="text"/>	<input type="text"/>

Agency	Violation Number	Area
S	<input type="text"/>	<input type="text"/>
S	<input type="text"/>	<input type="text"/>
S	<input type="text"/>	<input type="text"/>
S	<input type="text"/>	<input type="text"/>

Comments: